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(3)

TOLL FREE: 1-800 331-4537

PATTERSON, THUENTE, SKAAR & CHRISTENSEN, P.A.

4800 IDS Center, 80 South Eighth Street Minneapolis, Minnesota 55402-2100 USA

FACSIMILE COVER SHEET

TELEPHONE: (612) 349-5740

Amendment Transmittal

| | FACSIMILE: (612) 3 | 149-9200 | | | | |
|------------------------------------|---|----------------------------|-------------------------------|--|--|--|
| TOTAL NUI | MBER OF PAGES BEING SENT (INCLU | DING COVER SHEET): | 16 | | | |
| [] Original | documents to follow by mail | [X] No origina | [X] No originals will be sent | | | |
| DATE: | December 16, 2004 | | | | | |
| TO: | Examiner Christy Marie Green Group Art Unit 3635 | FAX #: | (703) 872-9306 | | | |
| PHONE #: | (703) 308-9693 | | | | | |
| Application : Applicant: Due Date: | No.: 10/655,984 Tlemcani et al. December 16, 2004 | OUR REF.: 2937.04 | U\$02 | | | |
| FROM: PHONE #: | Brian L. Jarrells (612) 252-1535 | | | | | |
| Attac | ched please find the following for filing in t | he above-identified applic | cation. | | | |
| (1) | Amendment in response to Office Action dated June 16, 2004; and | | | | | |

Petition for Extension of Period for Response for three months.

Respectfully submitted,

Brian L. Jarrells

Registration No. 53,067

CERTIFICATE OF FACSIMILE TRANSMISSION

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| Date Brian L. Jargells Date CONTROL ECALLY PRIVILEGED AND CONFIDENTIAL INFORMATION INTENDED F |

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Patterson, Thuente, Skaar & Christensen, P.A.

4800 IDS Center 80 South 8th Street

Minneapolis, Minnesota 55402-2100

Telephone: (612) 349-5740 Facsimile: (612) 349-9266

AMENDMENT TRANSMITTAL

Attorney Docket No. 2937.04US02

In re the application of:

Tlemcani et al.

Confirmation No.: 8925

Application No.:

10/655,984

Examiner: Green, C.

Filed:

September 5, 2003

Group Art Unit: 3635

For:

FIRE-RESISTANT DOOR

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

[]

Transmitted herewith is an Amendment in the above-identified application.

Enclosed are:

Amendment (12 pages). [X]

Petition for Extension of Period for Response. [X]

The filing fee has been calculated as shown below:

| | Claims Remaining After Amendment | Highest No. Previously Paid For | Present Extra (Equals) | Small Entity Rate | Add'l Fee | OR _ | Large Entity Rate | Add'l Fee |
|------------|----------------------------------|--|------------------------------|----------------------|--------------|------|----------------------|--------------|
| Total | 19 | - 20 | = 0 | x 25 | S | | x 50 | 3 |
| Indep. | 2 | - 2 | = 0 | x 100 | S | | x 200 | <u> </u> |
| | | · - | | + 180 | \$ | _ | + 360 | \$ |
| Mult. Dep. | L | ١ | l. | TOTAL | \$0 | OR | TOTAL | \$ |

^[] First Presentation of Multip's Dependent Claim [MDC]

If the entry in Column 1 is less than the entry in Column 2, write "0" in Column 3.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or independent) is the highest number found from the equivalent box in Column 1 of a prior Amendment or the number of claims originally filed.

Application No. 10/655,984

- [X] Applicant(s) is/are entitled to small entity status in accordance with 37 CFR 1.27.
- [X] The Commissioner is authorized to charge to Deposit Account No. 16-0631 the \$510.00 extension fee and any underpayments, overpayments or additionally required fees.

Respectfully submitted,

Brian L. Jarrells

Registration No. 53,067

Please grant any extension of line necessary for entry; charge any fee due to Deposit Account No. 16-0631.

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December 16, 2004

Date

Brian L. Jarrells